



King County

Department of Community and Human Services

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IMPLEMENTATION PLAN

2012 – 2017 Veterans and Human Services Levy:

Activity 1.4 A & B Contracted Post Traumatic Stress Disorder Treatment/Military Sexual Trauma

1. Goal

Increase self-sufficiency of veterans and vulnerable populations

2. Strategy

The Veterans and Human Services Levy Service Improvement Plan (SIP) set a goal of supporting veterans and their families to build stable lives and strong relationships.

3. Activity 1.4 Contracted Post Traumatic Stress Disorder treatment

Activity 1.4 Contracted Post Traumatic Stress Disorder treatment/Military Sexual Trauma described below is funded under Activity 1.4: Contracted Post Traumatic Stress Disorder treatment/Military Sexual Trauma.

4. Service Needs, Populations to be Served, and Promotion of Equity and Social Justice

a) Service Needs

Post-Traumatic Stress Disorder (PTSD) continues to be one of the largest challenges facing both recently returning veterans as well as veterans from earlier combat eras. Estimates based on the most recent census are that more than 20,000 veterans live in King County who are experiencing PTSD, have had one or more Traumatic Brain Injuries, and/or experienced Military Sexual Trauma. Further estimates based on national trends are that an additional 12,000 King County-residing veterans may have PTSD and are reluctant to seek treatment or support. Dependents of these veterans have fewer options for assistance because the Veterans Administration (VA) serves only veterans. As a result, the Levy-funded program that provides contracted PTSD treatment is particularly important for dependents of veterans who are also affected by their family members' military services. The demand remains high for these services and is expected to continue to grow with the influx of returning veterans of the Operation Iraqi Freedom and Operation Enduring Freedom wars.

The 2012-2017 SIP, approved by the King County Council, contained new language for Strategy 1.4. The SIP states:

“As military sexual assault (MST) is a leading cause of PTSD among women veterans, a workgroup will be convened consisting of MST survivor advocates, representatives of veterans service systems, sexual assault providers, mental health and trauma experts, levy oversight board members, and others to explore needs and design a service response as appropriate. Possibilities include trainings for service providers and Veterans Service Organizations using trainer and survivor co-leader models, or additional trauma counseling services.”
(Page 28 of the Veterans and Human Services Levy 2012-2017 SIP).

In 2013, a workgroup was convened to identify service needs of King County-residing survivors of MST, and to issue a report with recommendations on a service response. The report entitled “Status of Services in King County for Military Sexual Trauma Survivors: Findings, Gaps, and Recommendations” was finalized in October, 2013. The report noted that there is a lack of knowledge of the benefits and services available for survivors of MST by employers and service providers who have contact with survivors of MST. In addition, the report noted that staff of non-veteran organizations may not be familiar with military culture and/or the potential effects of MST, both of which can create misunderstandings or misperceptions of behaviors or actions of the survivors. For example, MST may contribute to the development of PTSD. A copy of the complete report is available at (<http://www.kingcounty.gov/operations/DCHS/Services/Levy.aspx>) or by calling (206 -263-9069) for a copy.

The Department of Defense reported that in 2002, the percentage of military personnel who experienced one or more incidences of MST was 55 percent for females and 23 percent for males. The National Center for PTSD estimates that between 40 – 60 percent of survivors of MST are at risk for PTSD. The estimates for the number of survivors of MST in King County range from a total of 5,000 to 6,000. The difficulty in providing more precise numbers is that not all survivors of MST identify as a survivor.

b) Populations to be Served

This service will be provided to King County residents who are veterans, other military personnel and their family members who qualify for services.

The MST workgroup identified King County residents who are survivors of MST as the population needing increased support and assistance in locating services and benefits to address the consequences of the trauma they experienced.

c) Promotion of Equity and Social Justice

The Equity and Social Justice Ordinance requires King County to consider the impacts of its policies and activities on its efforts to achieve fairness and opportunity for all people, particularly for people of color, low-income communities and people with limited English proficiency. Evaluate your activity's impact by responding to the following questions:

- *Will your activity have an impact on equity?*

Survivors of PTSD/MST experience a range of potential effects, including difficulty obtaining and remaining in jobs; symptoms of mental illness, substance abuse, and physical disabilities, and may be at increased risk for suicide. Each of these effects has an adverse impact on the survivor, including reduced incomes. The plan to provide increased assistance to survivors of MST will benefit this at-risk population.

- *What population groups are likely to be affected by the proposal? How will communities of color, low-income communities or limited English proficiency communities be impacted?*

Data from the King County Veterans' Program (KCVP) shows that the program is serving a similar number of African American (43%) and Caucasian (47%) clients, with smaller numbers of Hispanic, Native American, and Asian clients (totaling less than 10%). It is expected that the population served by this activity will be similar to that of KCVP.

Survivors of MST are not readily identified at this time in service and demographic reports, or from other sources such as the American Community Survey or client data through the Veterans Health Administration or private therapists. This is partially due to the fact that not all survivors of MST identify as having experienced that trauma, or develop symptoms of PTSD and seek help to address the symptoms they are facing. As noted above, the unaddressed symptoms may have an adverse effect on the ability to earn an income that meets the needs of the survivor.

- *What actions will be taken to enhance likely positive impacts on these communities and mitigate possible negative impacts?*

Survivors of PTSD/MST who are assisted to locate and obtain benefits, services, and access to programs should be more likely to maintain a more stable living and economic situation. For example, a survivor of PTSD/MST who is helped to sign up for and receive the Veterans' benefits for which they are eligible likely will realize an increase in their income as well as the ability to receive the services needed to address their particular situation.

5. Activity Description

In partnership with the Washington State Department of Veterans Affairs (WDVA) and other community based providers, levy funds shall provide Veterans Post Traumatic Stress Disorder counseling through fully qualified and suitable Contract Providers (Clinicians) to meet the counseling needs of war affected King County Veterans and their family members.

In addition to PTSD counseling services, the proposed activity for 2013-2015 is to provide MST-specific training to service providers and staff of agencies and organizations who work with or could work with survivors of MST. The anticipated results of this training will be increased awareness of services and programs that could benefit survivors of MST and where to refer the survivors of MST for these services and programs. In addition, MST-specific benefits training will be provided to Veteran Service Officers so that they are better able to help the survivors apply for and receive benefits and services for which they are eligible.

6. Funds Available

The 2012 Service Improvement Plan identified the following allocations for this activity. Additional funding noted below was provided by Supplemental Budget Ordinance 17407.

Fund Source	2012	2013	2014	2015	2016	2017
Veterans Levy	\$400,000	\$400,000	\$400,000	\$400,000	\$450,000	\$450,000
Supplemental Budget Ordinance 17407	\$50,000	\$200,000	\$200,000			
Total	\$450,000	\$600,000	\$600,000	\$400,000	\$450,000	\$450,000

The annual funding amounts noted above will be available based on the activity's performance and budget approval.

A total of \$26,000 of the \$200,000 allocated for 2013 from the Supplemental Budget Ordinance 17407 was used to commission the MST Report entitled Status of Services in King County for Military Sexual Trauma Survivors: Findings, Gaps, and Recommendation. This report helped frame the 2013 MST Request for Proposals process. The remaining balance of \$174,000 was awarded through this process for 2013 – 2014, with the option to continue the award through 2015 depending on the availability of funds.

7. Evidence-based or Promising Practices

The VA offers training on MST to its employees. This training covers a range of topics including how to bill for MST-related services. The training is not available for non-VA staff. Other MST trainings have been offered in King County but are not evidenced-based. A review of the literature does not suggest that an evidenced-based training for community-service entities exists at this time. The training funded by the Levy for MST will be evaluated for its usefulness in increasing the knowledge of the trainees, and may establish a preliminary step for a consistent and effective training that can be replicated for other locations.

8. Service Partnerships

To be determined based on the implementation of MST- Specific Training for Service and Program Providers, and Veteran Service Officers.

9. Performance Measures

The following performance measures for Contracted PTSD Counseling Services were identified by the Levy's Evaluation Team. Performance measures and targets are reviewed annually and updated when needed. Current performance measures can be found in the 2012 – 2017 Levy Evaluation Plan Implementation Plan and Activity Level Evaluation Templates on the levy website: [2012 - 2017 Levy Evaluation Plan Implementation Plan and Activity Level Evaluation Templates](#)

Objectives	Service Outputs/ Measures	Most Recent Performance	2013 Target(s)	Data Source
Treatment/ Intervention	• Number of clients receiving Levy-funded PTSD treatment	306 (Jan-Dec, 2012)	260	Report Card – Services
	• Number of hours of PTSD counseling provided	3,543 (Jan-Dec 2012)	2600	Report Card – Services
	• Hours of community education and professional training provided	117.5 (Jan-Dec 2012)	100	Report Card – Services
	• Percent of clients demonstrating reduced impacts of PTSD	90% (Jan-Dec 2012)	90%	Report Card - Outcomes

The following performance measures for the MST-Specific Training were identified by the Levy's Evaluation Team. Performance measures and targets are reviewed annually and updated when needed. Current measures can be found in the 2012-2017 Levy Evaluation Plan Implementation Plan and Activity Level Evaluation Templates on the levy website: [2012 - 2017 Levy Evaluation Plan Implementation Plan and Activity Level Evaluation Templates](#).

Objectives	Service Outputs/ Measures	Most Recent Performance	2014 Target(s)	Data Source
System Resources/ Capacity Building	• Procedure, budget and timeline for establishing workgroup	No Data	Completed by June 30, 2014	Report Card – Services
	• List of names and affiliations of workgroup members and meeting schedule	No Data	Completed by June 30, 2014	Report Card – Services
	• Final approved report of findings and recommendations for addressing MST	No Data	Completed by June 30, 2014	Report Card - Services